No fee PART B - FEE(S) TRANSMITTAL Complete and sond this form, together with applicable fee(s), to: Mail Mail Stop ISS LE FEE Commissioner for Patents P.O. Box 1450 JAN 1 7 2007 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 fis form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address) have its own certificate of mailing or transmission. 12/01/2006 110 7590 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. DANN, DORFMAN, HERRELL & SKILLMAN ካ601 MARKET STREET **SUITE 2400** PHILADELPHIA, PA 19103-2307 Robin L. Dolan (Depositor's name (Signature) January 9, 200 (Date) CONFIRMATION NO FIRST NAMED INVENTOR ATTORNEY DOCKET NO. APPLICATION NO. FILING DATE WFU-WH4 1654 02/19/1998 LOUIS C. ARGENTA 09/026,353 TITLE OF INVENTION: WOUND TREATMENT EMPLOYING REDUCED PRESSURE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE SMALL ENTITY ISSUE FEE DUE APPLN, TYPE 03/01/2007 \$1400 \$0 NO nonprovisional please apply previously CLASS-SUBCLASS **EXAMINER** ART UNIT LACYK, JOHN P 3735 128-897000 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Niels Hann (1) the names of up to 3 registered natent attorneys

Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.	or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.	2 Dann, Dorfman, Herrell & Skillm PC 3
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON T		
PLEASE NOTE: Unless an assignee is identified below, no assignee recordation as set forth in 37 CFR 3.11. Completion of this form is NO	data will appear on the patent. If an assignee is identific T a substitute for filing an assignment.	ed below, the document has been filed
(A) MAMP OF AGGIONEE	(D) DESIDENCE, (CITY and STATE OF COUNTRY)	

(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)

Wake Forest University Health Sciences Winston-Salem, NC

Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🙀 Corporation or other private group entity 🚨 Government

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Issue Fee
Publication Fee (No small entity discount permitted) 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed.

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□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

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Authorized Signature Niels Haun Typed or printed name

January 9, 2007 Registration No. 48,488

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## DANN, DORFMAN, HERRELL AND SKILLMAN

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January 9, 2007

Last Name of First Named Inventor:

MAIL STOP ISSUE FEE

**ARGENTA** 

Application No. 09/026,353

Allowed: December 1, 2006

Attorney Docket No. 0101-P00636US3

Filed: February 19, 1998

For: Wound Treatment Employing

Reduced Pressure

TO THE COMMISSIONER FOR PATENTS:

## SUBMISSION OF ISSUE FEE

The above-identified application has been allowed. In response to the Notice of Allowability dated December 1, 2006, enclosed are the following:

A copy of form PTOL-85 with authorization to charge Deposit
 Account No. 04-1406, and request to reapply previously paid issue fee.

Respectfully submitted,

DANN, DORFMAN, HERRELL AND SKILLMAN

A Professional Corporation Attorneys for Applicants

Rv

Niels Haun Ph.D.

PTO Registration No. 48,488